## U. S. DEPARTMENT OF AGRICULTURE 2006 SUMMER INTERN PROGRAM

## **RÉSUMÉ COVER SHEET**

JOD I WIII	per:		
Name:  Address:		Phone: (Home)(Work)	
Total Credits Earned: (Quarter) (Semester) (College transcript must be attached - student copy accepted)		Classification: (Graduate Student, Senior, Junior, Sophomore, Freshman	
Number o	of Credits in Progress:	Expected Graduation Date:	
	Employer's name:		
2.	Employer's name: Employer's address: Supervisor's name and phone numb		
2.	Employer's name: Employer's address: Supervisor's name and phone numb	er:	
2.	Employer's name:  Employer's address:  Supervisor's name and phone numb  Position title:  Date (From/To):	er:	

3.	3. Position title:					
	Date (From/To):					
	Employer's name:					
	Employer's address:					
Supervisor's name and phone number:						
REFERENCES WILL BE CONTACTED						
General Information						
Are yo	ou a U.S. citizen?	No [ ]	Yes [ ]			
Do you	a claim veteran's preference?	No [ ]	Yes [ ] (You must attach your DD-214)			
Signature: Date:						
Agency Use Onl Date Receive	y: ed: Grade:	Date S	elected: # of Apps:			